FEC	FORM	2	
STATE	MENT O	F CANDIDACY	

RECEIVE FEC MAIL OF 2015 JUN 24 AI

1. (a) Name of Candidate (in full) Ms. MICHEL ANISS A POWELL E					
(b) Address (number and etreet) Check if address changed 2. FEC Candidate Identification Number					
(c) City, State, and ZIP Code SC 291(8 Statement (N) OR (A)					
4. Party Attiliation 5-Office Sought Carolina 6. State & District of Carolina 66. State & District of Carolina 66.					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
7.11					
7. I hereby designate the following named political committee as my Principal Campaign Committee for the election(s).					
NOTE: This designation should be filed with the appropriate office listed in the instructions. (year of election)					
(a) Name of Committee (in full)					
Pro Ject Ho. P. E.					
(b) Address (number and street)					
1616 Enberty St.					
(c) City, State, and ZIP Code					
Drangs burg SC 29118					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES					
(Including Joint Fundraising Representatives)					
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.					
6 \/ \(\O\)					
(a) Name of Committee (in full)					
(a) Name of Committee (in tun)					
(b) Address (number and street)					
(c) City, State, and ZiP Code					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Signature of Candidate Date					
mpowell. 6-16-2015					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.					

19 JUN 2015 PM2 L



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ના તિલ્લા કાર્યા માના માત્ર કરતા તે તે કામ તામ માત્ર માટે કામ તામ તામ માત્ર માટે માત્ર માત્ર માત્ર માત્ર માત્ર આ પ્રાથમિક માત્ર માત્ર

(0) (0) (1) (1)

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